

DATE: \_\_\_\_\_

PERMIT # \_\_\_\_\_

CITY OF ASHEVILLE  
APPLICATION FOR SIGN PERMITS  
ZONING ADMINISTRATION - P.O. BOX 7148 ASHEVILLE, NC. 28802  
(704) 259-5850

**LOCATION:**

STREET: \_\_\_\_\_

PIN # \_\_\_\_\_

ZONING DISTRICT: \_\_\_\_\_

**OWNER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ FAX( ) \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_ FAX( ) \_\_\_\_\_

CLASSIFICATION OF SIGN: \_\_\_\_\_ ON-PREMISE \_\_\_\_\_ OFF-PREMISE

TYPE OF SIGN: \_\_\_\_\_ FREESTANDING \_\_\_\_\_ GROUND \_\_\_\_\_ WALL \_\_\_\_\_ PROJECTING \_\_\_\_\_ AWNING  
\_\_\_\_\_ CANOPY \_\_\_\_\_ WINDOW \_\_\_\_\_ TEMPORARY \_\_\_\_\_ OTHER

**PERMIT FEE: \$** \_\_\_\_\_ **CONTRACTOR'S CITY PRIVILEGE LICENSE #** \_\_\_\_\_

**TENANCY:** \_\_\_\_\_ **SINGLE TENANT** \_\_\_\_\_ **MULTI-TENANT DEVELOPMENT ID** \_\_\_\_\_ **MULTI-TENANT JOINT ID** \_\_\_\_\_

Show dimensions of sign, wording, relationship to building, property lines, etc. (Use this space or attach separate drawings)

If a sign permit is granted \_\_\_\_\_ agree to conform to all City ordinances and the laws of the State of North Carolina regulating such work and the specifications and/or plans submitted. \_\_\_\_\_ hereby affirm that the foregoing statements are accurate and true to the best of my understanding and knowledge.

SIGNATURE OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

\*\*\*\*\*  
Refused by: \_\_\_\_\_ Date: \_\_\_\_\_ Reason: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

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